



**REQUEST FOR INFORMATION RECORDED BY BODY WORN CAMERA
TEXAS OCCUPATIONS CODE §1701.661**

REQUESTOR'S INFORMATION:

1. Requestor's Name: _____
 2. Address: _____
 3. Phone Number: _____
 4. Email Address: _____
 5. Date: _____
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BODY WORN CAMERA RECORDED INFORMATION: A member of the public is required to submit the following information in writing for information recorded by a body worn camera:

1. The date and approximate time of the recording: _____

 2. The specific location where the recording occurred (as specific as possible): _____

 3. The name of one or more persons known to be a subject of the recording (the officer is not a subject of the recording): _____

 4. Report or Incident number (if known): _____
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THE CITY OF COLLEGE STATION MAY SEEK TO WITHHOLD, ASSERT ANY EXCEPTIONS OR REDACT THE INFORMATION REQUESTED ACCORDING TO CHAPTER 552, GOVERNMENT CODE OR ANY OTHER LAW.

CSPD Records Use Only:

Incident #: _____

Records Personnel Initials: _____

Date Request Received: _____